

Corlett. (W. J.)

A peculiar disease of the skin

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A PECULIAR DISEASE OF THE SKIN, ACCOMPANIED BY
EXTENSIVE WARTY GROWTHS AND SEVERE ITCHING.

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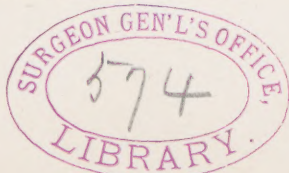
IN the British Journal of Dermatology, June, 1896, Mr. J. Numa Rat, of St. Kitt's, reports a case of "coolie itch," with photographic illustrations of the disease. From the cut and description given, I was forcibly reminded of a case that presented itself some years ago, the history of which may be given as follows:

C. W., male, aged fifty-two years, complained of a dry, papular eruption on the outer surface of the legs, accompanied by severe itching. The patient further said he had always been troubled more or less with an itchy skin, generally worse in the winter, although at no season of the year was it entirely absent. In February, 1888, four months before the patient came under observation, there appeared in the middle third, external surface of the legs, reddish papules, slightly scaly, and accompanied by severe paroxysms of itching. The papules extended at the periphery until they attained a size varying from that of a split pea to a half-dollar. Their outline was roundish or oval, or, after coalescing, irregular in shape, elevated distinctly above the surrounding skin, with a papular, slightly scaly surface, resembling flat, warty growths. No moisture was present, but after vigorous scratching a small quantity of blood oozed from the surface.

The veins of the legs were not enlarged, although the eruption at the base presented a bluish or violaceous tint, which made one think of angiokeratoma as described by Mibelli,* Dubreuilh,† Windham

* Mibelli. *Giorn. Ital. d. Malatt. Ven. e d. pelle. Fasc. iii, Sett., 1889.*

† Dubreuilh. *Ann. de la polycl. de Bordeaux, Janvier, 1889.*



Cottle,* and Zeisler.† There was, however, no cavernous dilatation of the blood-vessels apparent.

During certain stages of development it looked not unlike lichen planus. In the course of a few months (July, 1888) the disease had extended, so that a few small papules were found on the thighs, arms, and trunk. These were sparsely distributed, smaller, being lentil-



sized, and of a brighter color and very itchy. Aside from the subjective symptoms already given, the patient complained of a "tired feeling in the legs" with a slight "feeling of numbness in the feet." The tendon reflex at the knee was nearly absent. At this time the accompanying photograph was taken. (See cut.)

* Cottle. St. George's Hospital Reports, vol. ix, 1877-'78.

† Zeisler. Trans. Am. Dermat. Association, 1893.

Galvanism and various other methods of treatment were employed, without apparently influencing the course of the disease.

In the autumn of the same year (November 17, 1888) my notes show that there was a slight diminution in the papillary growths; the itching was somewhat less severe, appearing at intervals of two or three days. The patient claimed that his feet were swollen, so that a change of boots was necessary, although no enlargement could be detected by the eye. He also complained of a pricking, benumbed feeling in the soles and palms; he believed he could not tell whether or not his feet were wet, and was afraid they might become frostbitten during the winter without his knowledge.

He could walk in the dark without difficulty, knew the location of his feet, and could touch the point of his nose with his eyes closed. On examination, the sensation was found to vary in different parts; thus on the ball at the base of the great toe a pin was thrust into the skin for a short distance with but slight pain, while the sensation in the sole at the arch of the foot was increased. At the ball he could not distinguish between one and two pins nearer than half an inch, while on the leg they could not be distinguished nearer than an inch apart.

At this time the lower region of the spine was blistered, under which the numbness was less complained of, and finally it was noticed only in the toes.

During the winter under a tonic treatment, which consisted of the mineral acids, nux vomica, and the zinc phosphide, his general condition improved, and his weight increased twenty pounds. Locally, resorcin, carbolic acid, and salicylic acid, in various vehicles, seemed best to meet the indications, and finally in June, 1889, one year after the patient was first seen, my notes show that the verrucous plateaus had well-nigh subsided, had lost their papillary appearance, were slightly scaly, and assumed a dark-brownish color, resembling very closely the cut of Mr. Numa Rat's case.

From this time the patient was only seen at longer intervals, the eruption gradually subsided, the pigmentation was absorbed, and at the present time the subjective symptoms, aside from the occasional pruritus, are no longer complained of.

This case I believe of interest, because of its unique appearance and the peculiar neurotic symptoms complained of. In spite of Unna's view, one might be inclined to the opinion that the papillary hypertrophy following and associated with disturbances of sensation were the result of the latter. Again, as the patient had always had an itchy skin, the act of scratching which preceded the papillary hyper-

trophy might be served as a means of inoculating micro-organisms which, according to Kühnemann* and others, are found in verrucous growths of the skin.

Of the extensive warty growths reported, notably those of Thin,† Tenneson and Besnier,‡ and Géury,§ the accompanying symptoms complained of in this case were absent. Again Mr. Numa Rat's description presents such a close similarity, that it occurred to me they might be of a like nature. Without questioning the position taken by this writer, that "coolie itch" is a disease *sui generis*, yet my own experience in investigating the so-called "prairie itch," "miner's itch," "lumberman's itch," and "Scioto scratches," of our own country, published some years ago,|| and more recent observation of various cutaneous diseases within the tropics, inclines me to the belief that we should accept with caution many of the so-called race and topographic diseases of the skin, for with few exceptions their counterparts may be seen among the inhabitants of the north temperate zone.

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* Kühnemann. Monatshefte f. prakt. Dermatol., i, viii, No. 8.

† Thin. Med.-Chir. Transact., vol. lxiv, London, 1881.

‡ Tenneson and Besnier. Ann. dermat., 2c, t. x, 1889, pp. 22, 200.

§ Géury. Ann. dermat., 2c, t. x, 1889, p. 92.

|| A Clinical Study of the So-called Prairie Itch, Lumberman's Itch, etc. Jour. Am. Med. Association, October 13, 1888.

